COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3, Also complete Agent item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse ☐ Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece. or on the front if space permits. D. Is delivery address different from item 1? 1 Article Addressed to: If YES, enter delivery address below: MAK 01 2007 BRUCE EVANS NEPHI SANDSTONE CORP 1250 N 200 W **PO BOX 137** 3. Service Type M Certified Mail Express Mail **NEPHI UT 84648** ☐ Return Receipt for Merchandise ☐ Registered ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) PB 2/22/07 S0230065 □ Yes 2. Article Number 0004 1824 7004 2510 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540

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